			<u></u>				App	olication or	Docke	t Num	ber		
P	ATENT AF	PLICATION Effect	FEE DET	ERMINATIO 1, 1996	N RECOR	D	(	890	140	0			
CLAIMS AS FILED - PART I							SMALL ENTITY			OTHER THAN R SMALL ENTITY			
			(Column 1) NUMBER FILED		NUMBER EXTRA		TE	FEE		RAT	E	FEE	
OR		MOMBER	NOMIDENTILLE				ē	385.00	OR		7	70.00	
SIC	FEE					<b>*</b> \$	x\$11=		OR	x\$22=			
OTAL CLAIMS		10	minus 20	*		_	x40=			×80	)=	<u> </u>	
	ENDENT CLAI			minus 3 =   NT		-	+130=		OR		260=		
MULTIPLE DEPENDENT CLAIM PRESENT  * If the difference in column 1 is less than zero, enter "0" in column 2						<u> </u>			OR	TOT	-	770	
If the	difference in col	umn 1 is less than 2	910, 611161 0 111 0			T	OTAL		OR		THER	<del>/*</del>	
	A	CLAIMS AS A	MENDED -	PART II (Column 2)	(Column 3)	;	SMALI	ENTITY	OR		MALL E		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RA	TE.	ADDI- TIONAL FEE	
	Total	Same	Minus	**	=	x	\$11=		OR	x\$	22=		
I L	Independent		Minus	ARTON STATE OF THE	± de la composition della com	,	<b>&lt;</b> 40=	المجاروي والمرادات	OR	×ε	30=		
A	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					]  +	130=		OR		60=		
-		(0.1						TOTAL ADDIT. FEE			OR <sub>ADDIT</sub> . FEE		
AMENDMENT B		(Column 1)  CLAIMS REMAINING AFTER AMENDMEN		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONA FEE		F	RATE	ADDI TIONA FEE	
	Total	* 9	Minus	"80	= /		x\$11=	=	$\bigcap$ $\circ$	R X	\$22=	1	
	Independen	n (* 3	Minus	*** 3	= X	] [	x40=	:	╛。	R )	k80=	1	
AM		FIRST PRESENTATION OF MULTIPLE D			CLAIM	] [	+130	=	٥	R +	260=	/	
	1	(Column 3)						TOTAL ADDIT. FEE			OR ADDIT. FEE		
AMENDMENT C		(Column 1)  CLAIMS REMAINING AFTER AMENDMEN		HIGHEST NUMBER PREVIOUSL' PAID FOR	PRESENT EXTRA		RAT	ADD TION FEE	AL		RATE	ADI TION FE	
	Total	*	Minus	**	=		x\$11	=		OR -	x\$22=	-	
	Independe	ent *	Minus	***	=		x40	)=		OR	=08x		
	FIRST PI	FIRST PRESENTATION OF MULTIPLE			DEPENDENT CLAIM			0=		OR	+260=		
:	If the entry in o	f the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number						TOTAL OR ADDIT. FEE					
**	*If the "Highest The "Highest I	Number Previously Number Previously	Paid For" (Total	or Independent) is	the highest numb	er roun	d in the	Trademark C	office. U.S	S. DEPA	RTMENT	OF COM	